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(Signature)
(Date)

LEXMARK INTERNATIONAL, INC.
INTELLECTUAL PROPERTY LAW DEPARTMENT
740 WEST NEW CIRCLE ROAD
BLDG. 082-1
LEXINGTON, KY 40550-0999

APPLICATION NO. 10-823,030	FILED DATE 04/10/2004	FIRST NAMED INVENTOR John William Krawczyk	ATTORNEY DOCKET NO. 2904-0090 02	CONFIRMATION NO. 5281
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TITLE OF INVENTION: MICRO-FLUIDIC EJECTION ASSEMBLIES

APPL. TYPE nonprovisional	SMALL ENTITY NO	ISSUE FEE DUE \$1400	PUBLICATION FEE DUE \$300	PREV. PAID ISSUE FEE \$0	TOTAL FEES DUE \$1700	DATE DUE 10/09/2007
EXAMINER MARTIN, LAURIE		ART UNIT 2853	CLASS-SUBCLASS 347-050000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.303). <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB-122) attached. <input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB-147, Rev. 03-02 or more recent) attached. Use of a Customer Number is required.	2. For pointing on the patent from page, list: (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1. Luedeka, Neely & Graham, PC 2. 3.
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
 PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE Lexmark International, Inc.	(B) RESIDENCE (CITY AND STATE OR COUNTRY) Lexington, Kentucky
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Please check the appropriate assignee category (or categories) (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted: <input checked="" type="checkbox"/> Issue Fee <input type="checkbox"/> Publication Fee (No small entity discount permitted) <input checked="" type="checkbox"/> Advance Order - # of Copies: 2	4b. Payment of Fee(s) (Please first reapply any previously paid issue fee shown above) <input type="checkbox"/> A check is enclosed. <input type="checkbox"/> Payment by credit card Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 12-1213 . (Enclose an extra copy of this form.)
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5. Change in Entity Status (from status indicated above)
☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature <i>Neill R. Kahle, Jr.</i>	Date 8-8-2007
Typed or printed name Neill R. Kahle, Jr.	Registration No. 50,383

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